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UTILITY PATENT APPLICATION **TRANSMITTAL**

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Title Antimicrobial Bra	
First Inventor Kathleen Gendel	
Attorney Docket No. 5492-4	

(Only for new	nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.			
1	APPLICATION ELEMENTS of the 600 concerning utility patent application contents.	ADDRESS TO:	Mail Stop F P.O. Box 1	oner for Patents Patent Applicatio 450 VA 22313-1450	
1. XX Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. XX Specification [Total Pages 11] (preferred arrangement set forth below) Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program isiting appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Reader Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper C. Statements verifying identity of above copies					or ove copies
- Claim(s)	of the Disclosure	ACCOMPAN	TING AP	PLICATION	I PARIS
19. CORRESPONDENCE ADDRESS					
Customer Number or Bar Code Label [Insert Customer No. or Attach bar code label here) OR Correspondence address below					
Name Robert S. Lipton, Esquire					
	LIPTON, WEINBERGER & HUSICK	N Post 027			
	201 North Jackson Street, P.C Media). Box 934 State PA		Zip Code	19063-0934
		Telephone 610-56646(000	Fax	566-3660
Name (Print/Type)		Registration No. (Attorne)		25,403	
Name (Print/Type) Robert S. Lipton Signature		1 - 3	, 3,	Date	6/20/2003

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PTO/SB/17 (05-03)
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FEE	TRA	NS	TIME	TAL
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Effective 01/01/2003. Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

SUBMITTED BY

Name (Print/Type)

Signature

Robert S. Lipton

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Complete if Known			
Application Number			
Filing Date			
First Named Inventor	Kathleen Gendel		
Examiner Name			
Art Unit			
Attorney Docket No.	5492-4		

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check XX Credit card Money Other None	3. A	DDIT	ONAI	L FEE	S	
Deposit Account:	<u>Large</u>	Entity	Small	Entity	•	
Deposit Account.	Fee		Fee	Fee	Fee Description	
Account	1051	(\$) 130	2051	(\$) 65		Fee Pald
Number Deposit	1051	50	2052		Surcharge - late filing fee or oath Surcharge - late provisional filing fee or	
Account	1052	30	2052	25	cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee 375	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375	1452	110	2452	55	Petition to revive - unavoidable	
	1453	1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	470	2502	235	Design issue fee	
Total Claims 16 -20** = 0 X = 0	1503	630	2503	315	Plant issue fee	
Independent 2 - 3** = 0 X = 0	1460	130	1460	130	Petitions to the Commissioner	
Muliupie Dependent	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be	
1204 84 2204 42 ** Reissue independent claims					examined (37 CFR 1.129(b))	
over original patent	1801	750 900	2801		Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reisaue claims in excess of 20 and over original patent	1802		1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 0 Other fee (specify)						
**or number previously paid, if greater; For Reissues, see above **Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						
SUBMITTED BY (Complete (# applicable)						

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Registration No.

(Attorney/Agent)

25,403

Telephone 610-566-6000

6/20/2003

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